

## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org



J. Cue

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STATE OF HAWAII
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

(First)	(Middle)	TELEPHONE
STEVEN	P.	535-5913
		FAX
745 FORT STREET, SUITE 1800		
(State)	(Zip Code)	
HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)		TELEPHONE
		FAX
(State)		(Zip Code)
	STEVEN  JITE 1800  (State)  HI  n only if you are employed by a business entity whice	STEVEN P.  UITE 1800  (State)  HI  In only if you are employed by a business entity which has been retained to lobby)

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE			
THE GAS COMPANY, LLC		535-5900			
MAILING ADDRESS (Street)		FAX			
745 FORT STREET, SUITE 1800		535-5944			
(City)	(State)	(Zip Code)			
HONOLULU	HI	96813			
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE			
STEVEN P. GOLDEN		535-5913			
MAILING ADDRESS (Street)		FAX			
745 FORT STREET, SUITE 1800		535-5943			
(City)	(State)	(Zip Code)			
HONOLULU	HI	96813			

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	C Tourism & Recreation	
Consumer Protection & Commerce	☐ Hawaiian Affairs	Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	Health	<ul><li>Planning, Land &amp; Water</li><li>Use Management</li></ul>	Other: (indicate below)	
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections		
	ION OF LOBBYIST			
I hereby certify that	the information furnished abov	re is, to the best of my knowled	lge, correct and complete.	
St. P.	SUL	511		
	(Signature of Lobbyist) (Date)			
PART V AUTHORIZA	TION TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
JIM R. YATES		PRESIDENT & CHIEF EXECUTIVE OFFICER		
NAME OF ORGANIZATION (	if applicable)		TELEPHONE	
THE GAS COMPANY, LLC		535-5900		
MAILING ADDRESS (Street)			FAX	
745 FORT STREET, SUITE 1800		535-5944		
(City)	(State)		(Zip Code)	
HONOLULU	HI		96813	
I hereby authorize the above, named person to engage in lobbying activities on behalf of the undersigned.				
	un Mala		1/08/07	
(Signature of	Authorizing Officer or Person Repres	sented)	(Date)	

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